

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008560

FILED
Apr 09, 2008
Secretary of State

Entity Name: FUNDACION KANJOBAL GUATEMALTECA, INC.

Current Principal Place of Business:

1101 N.W. 9TH COURT
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 901436
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 75-3087248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FRANCISCO, ANTONIO LEON
1101 N.W. 9TH COURT
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRANCISCO, ANTONIO LEON
Address: 1101 N.W. 9TH COURT
City-St-Zip: HOMESTEAD, FL 33030

Title: VPD () Delete
Name: JUAREZ, MARCOS
Address: 1141 NW 9TH ST
City-St-Zip: HOMESTEAD, FL 33030

Title: DS () Delete
Name: DIEGO, MIGUEL
Address: 1227 N.W. 12TH ST.
City-St-Zip: HOMESTEAD, FL 33030

Title: TREA () Delete
Name: MARCOS, GERONIMO
Address: 1291 N.W. 10TH ST.
City-St-Zip: HOMESTEAD, FL 33030

Title: TRES () Delete
Name: PEDRO, ANDRES
Address: 600 N.W. 8TH AVE.
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: PASCUAL, JUAN
Address: 1250 SW 4TH ST APT#73
City-St-Zip: HOMESTEAD, FL 33030

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: TOMAS ANDRES, PEDRO
Address: 15950 SW 295TH ST APT 99
City-St-Zip: HOMESTEAD, FL 33030

Title: TRES (X) Change () Addition
Name: MARCOS, GERONIMO
Address: 1291 NW 10TH ST
City-St-Zip: HOMESTEAD, FL 33030

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANCISCO ANTONIO LEON

Electronic Signature of Signing Officer or Director

PRES

04/09/2008

Date